UTILITY PATENT APPLICATION

TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	/_
First Inventor	Didier Frantz
Title	SYSTEM AND METHOD FOR DECODING BARCODES OF USING DIGITAL IMAGING TECHNIQUES
Funna Adaild abad Na	

		1 - 7					
See MPEP c	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Commissi	Patent Applicationer for Paten 1450 a VA 22313-14	nts			
(Submit 2.	ed arrangement set forth below) iptive title of the invention Reference to Related Applications ment Regarding Fed sponsored R & D ence to sequence listing, a table, computer program listing appendix ground of the Invention Summary of the Invention Description of the Drawings (if filed) ed Description	7. CD-ROM or CD-R in dupli Computer Program (Appe 8. Nucleotide and/or Amino Acid (if applicable, all necessary) a. Computer Readable b. Specification Seque i. CD-ROM or Cl ii. Paper c. Statements verifying ACCOMPANYING AF	Sequence S Form (CRF) Ince Listing of D-R (2 copies	Submission on: es); or above copies			
- Claim((s) act of the Disclosure	ACCOMPANTING AT	PLICAIN	UN PARIS			
4. ✓ Drawin 5. Oath or Decl a. ✓ Nev b. Cop (for i. 3 6. Appli 18. If a CONTII specification foli Prior application ir For CONTINUATI 5b, is considered	Identition [Total Sheets 8] Identition [Total Sheets 3] My executed (original or copy) Dy from a prior application (37 CFR 1.63(d)) Continuation/divisional with Box 18 completed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Identity of the continuation of the prior application of the prior ap	37 CFR 1.76: uation-in-part (CIP) of prior applicatio Art Unit: the prior application, from which an oath of or or divisional application and is hereby	ent pee) ument (if appropriate) 449 d (MPEP 503 temized) y Document(simed) under 35 U. ust attach for ad in the first	Power of Attorney plicable) Copies of IDS Citations Solutions So			
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Name (Print/Type) Avi Outmezguine /							
Signature	- AVI Council grants	, , , , , , , , , , , , , , , , , , , ,	Date M	March 8, 2004			
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This collection of information is required by \$7 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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 FEE TRANSMITTAL			· · · · · · · · · · · · · · · · · · ·			ete II	Known	
O I LE MANOMITTAL			7 Applied tell 11 de l'Ibel		r			
for FY 2004			Filing Date					
Effective 10/01/2003. Patent fees are subject to annual revision.			First Named Inventor			er Fr	antz	
Applicant claims small entity status. See 37 CFR 1.27	\blacksquare	Examiner Name						
	Art Unit		_					
TOTAL AMOUNT OF PAYMENT (\$) 430		Attorney Docket No.						
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
Check Credit card Money Order None	3. ADDITIONAL FEES Large Entity _ Small Entity							
Deposit Account:	Fee			ee	E.	ioo D	escription	
Deposit Account			Code				·	Fee Paid
Number Deposit	1051		2051		-		iling fee or oath	
Account Name	1052	50	2052		cover sheet		provisional filing fee or	
The Director is authorized to: (check all that apply)	1053		1053		Non-English	•		
✓ Charge fee(s) indicated below Credit any overpayments		2,520			_	•	t for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804		Requesting Examiner ad		ation of SIR prior to	L
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1,840*	1805 1		Requesting Examiner a		cation of SIR after	
FEE CALCULATION	1251	110	2251				ly within first month	
1. BASIC FILING FEE		420	2252				ly within second month	
Large Entity Small Entity Fee Fee Fee Fee Pescription Fee Paid	1253		2253			•	ly within third month	
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)		1,480	2254		_		ly within fourth month	
1001 770 2001 385 Utility filing fee 385	1255	2,010	2255	1,005	Extension f	for rep	ly within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A	Appeal		<u> </u>
1003 530 2003 265 Plant filing fee	1402		2402		-		upport of an appeal	├
1004 770 2004 385 Reissue filing fee	1403		2403		Request for		-	
1005 160 2005 80 Provisional filing fee		1,510					e a public use proceeding	
SUBTOTAL (1) (\$) 385	1452		2452				- unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330 1,330	2453 2501				- unintentional	
Fee from Ext <u>ra Claims below</u> Fee Paid	1502		2502		Utility issue Design issu	•	or reissue)	
Total Claims 25 -20** = 5 x 9 = 45	1503		2503		Plant issue			
Independent Claims 2 - 3** = X = 0	1460		1460				Commissioner	
Multiple Dependent =	1807	50	1807	50	Processing	q fee u	nder 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806		_	_	formation Disclosure Stmt	
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	8021	.40	8021	40	Recording e	each p	patent assignment per	
1202 18 2202 9 Claims in excess of 20	1809		2809		property (tir	imes n	umber of properties) on after final rejection	├ ─┤!
1201 86 2201 43 Independent claims in excess of 3	1009	, , ,	2009	503	(37 CFR 1.			
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each a	ddition	nal invention to be	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	1 770	2801	385		•	R 1.129(b)) httinued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20	1802		1802		Request for	for exp	edited examination	
and over original patent			ecify)		of a design	appli		
SUBTOTAL (2) (\$) 45 **or number previously paid, if greater; For Reissues, see above	l .		Basic F	iling Fe	ee Paid	SI	JBTOTAL (3) (\$) 0	
SUBMITTED BY (Complete (if applicable))								
Name (Print/Type) Avi Outmezguire			tion No.	Т		$\overline{}$	Telephone 212-278-0178	
Signature		(Attorney/	(Agent)			-	Date March 8 2004	

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